

Fill in this information to identify the case:

Debtor name **Golden Seahorse LLC**

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) **22-11582**

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 16, 2022**

X /s/ Jubao Xie

Signature of individual signing on behalf of debtor

Jubao Xie

Printed name

Managing Member of Hysendal USA LLC, Sole Member

Position or relationship to debtor

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United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **22-11582**

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 165,000,000.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 10,754,311.27
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 175,754,311.27

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 137,025,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 503,286.44
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 5,837,344.27
4. Total liabilities Lines 2 + 3a + 3b	\$ 143,365,630.71

Fill in this information to identify the case:

Debtor name **Golden Seahorse LLC**United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**Case number (if known) **22-11582**☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$3,000.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Bank of America

Operating

8110

\$1,822,784.84

3.2. Bank of America

Revenue Deposit

7847

\$321,732.90

3.3. Bank of America

Manager

8123

\$448.44

3.4. Wells Fargo

Cash Management Account (ACA)

5401

\$9,352.25

3.5. Cathay Bank

Checking

7218

\$13,860.51

3.6. Wells Fargo

Deposit Account Control Agreements (DACA)

6473

\$3,855.44

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4. **Other cash equivalents** (Identify all)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$2,175,034.38

Part 2: Deposits and Prepayments

6. **Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **287,988.91** - **0.00** = **\$287,988.91**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$287,988.91

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Various Housekeeping Supplies		\$0.00		\$20,000.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$20,000.00

24. **Is any of the property listed in Part 5 perishable?**

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- ☐ No
☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☐ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☐ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Furniture, fixture and Fittings	\$0.00	FMV	\$2,490,108.90
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Computer - \$78,719.01 Office Equipment - \$17,321.86 Software - \$142,709.96	\$0.00	FMV	\$238,750.83

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$2,728,859.73

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☐ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☐ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.

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☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	Other Machinery and Equipment	\$0.00	FMV	\$5,490,138.95

51. **Total of Part 8.** **\$5,490,138.95**
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☐ No. Go to Part 10.

☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

	Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1.	Holiday Inn Manhattan Financial District 99-103 Washington Street New York, NY 10006	Fee Ownership	\$0.00	FMV	\$165,000,000.00

56. **Total of Part 9.** **\$165,000,000.00**
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

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Name

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- ☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☐ No
☒ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

**74,699 share at \$0.7 per share
(Norwegian Airline Debt to Stock)**

52,289.30	-	0.00	=	\$52,289.30
Total face amount		doubtful or uncollectible amount		

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$52,289.30

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$2,175,034.38	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$287,988.91	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$20,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$2,728,859.73	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$5,490,138.95	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$165,000,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+\$52,289.30	
91. Total. Add lines 80 through 90 for each column	\$10,754,311.27	+ 91b. \$165,000,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$175,754,311.27

Fill in this information to identify the case:

Debtor name **Golden Seahorse LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	HI FIDI B NOTE OWNER LLC <small>Creditor's Name</small> c/o Triangle Capital Group LLC 452 Fifth Avenue, 30th Floor New York, NY 10018 <small>Creditor's mailing address</small> morris@trianglecap.com <small>Creditor's email address, if known</small> September 2018 <small>Date debt was incurred</small> <small>Last 4 digits of account number</small> <small>Do multiple creditors have an interest in the same property?</small> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. 1. Wilmington Trust, National 2. HI FIDI B NOTE OWNER LLC	Describe debtor's property that is subject to a lien Holiday Inn Manhattan Financial District 99-103 Washington Street New York, NY 10006 Describe the lien Mortgage Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50,000,000.00 \$165,000,000.00

2.2	Wilmington Trust, National <small>Creditor's Name</small> Association, as Trustee 1100 North Market Street Wilmington, DE 19801 <small>Creditor's mailing address</small> cmbtrustee@wilmingtontrust.com <small>Creditor's email address, if known</small>	Describe debtor's property that is subject to a lien Holiday Inn Manhattan Financial District 99-103 Washington Street New York, NY 10006 Describe the lien Mortgage Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim?	\$87,025,000.00 \$165,000,000.00
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Debtor **Golden Seahorse LLC**
Name

Case number (if known) **22-11582**

Date debt was incurred

September 2018

Last 4 digits of account number

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Do multiple creditors have an
interest in the same property?

☐ No

☒ Yes. Specify each creditor,
including this creditor and its relative
priority.

Specified on line 2.1

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$137,025,000
.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Chava Klein, Esq.
452 Fifth Avenue
30th Floor
New York, NY 10018

Line **2.1**

King & Spalding LLP
Attn: Scott Levine, Esq.
1185 Ave of the Americas, 34Fl
New York, NY 10036

Line **2.1**

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Debtor name **Golden Seahorse LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **22-11582**

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Department of the Treasury Internal Revenue Service PO Box 7346 Philadelphia, PA 19101</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Taxes</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$0.00	\$0.00
2.2	<p>Priority creditor's name and mailing address</p> <p>NYC Department of Finance P.O. Box 3646 New York, NY 10008</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Hotel Occupancy Taxes</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$220,000.00	\$220,000.00

Debtor	Golden Seahorse LLC <small>Name</small>	Case number (if known)	22-11582
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2.3	Priority creditor's name and mailing address NYC Water Board PO Box 11863 Newark, NJ 07101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,286.44 \$13,286.44
	Date or dates debt was incurred	Basis for the claim: Water Charges	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

2.4	Priority creditor's name and mailing address NYS Sales Tax Processing PO Box 15172 Albany, NY 12212	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$270,000.00 \$270,000.00
	Date or dates debt was incurred	Basis for the claim: Sales Taxes	
	Last 4 digits of account number	Is the claim subject to offset?	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
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3.1	Nonpriority creditor's name and mailing address AAA Phone on Hold PO Box 4843 Cleveland, TN 37320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49.84
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3.2	Nonpriority creditor's name and mailing address Agoda International USA Inc. PO Box 735562 Dallas, TX 75373 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,300.90
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3.3	Nonpriority creditor's name and mailing address Aquamenities 2490 Arnold Industrial Way Concord, CA 94520 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,880.00
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3.4	Nonpriority creditor's name and mailing address AT&T PO Box 5019 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$310.99
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3.5	Nonpriority creditor's name and mailing address Best Cleaners 571 Main Street New York, NY 10044 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$526.14
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3.6	Nonpriority creditor's name and mailing address Bigintel FSS & Security Manage 47-46 45th Street Suite 3F Woodside, NY 11377 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,291.92
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3.7	Nonpriority creditor's name and mailing address BOOKING.COM BV 5295 Paysphere Circle Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,932.82
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3.8	Nonpriority creditor's name and mailing address Canary Technologies Corp. PO Box 7603 San Francisco, CA 94120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,482.20
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3.9	Nonpriority creditor's name and mailing address Capital Supply Company 115 Castle Road Secaucus, NJ 07094 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,858.71
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3.10	Nonpriority creditor's name and mailing address Casey Fire Systems Inc. 39-27 59th Street Woodside, NY 11377 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,311.24
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Debtor	Golden Seahorse LLC Name	Case number (if known)	22-11582
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3.11	Nonpriority creditor's name and mailing address Cintas Corporation 97627 eagle Way Chicago, IL 60678 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38.22
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3.12	Nonpriority creditor's name and mailing address Citywide Fire Sprinkler PO Box 564520 College Point, NY 11356 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,300.00
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3.13	Nonpriority creditor's name and mailing address ConEdison PO Box 1702 New York, NY 10116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.14	Nonpriority creditor's name and mailing address Consolidated Hospitality Suppl PO Box 677130 Dallas, TX 75267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$336.64
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3.15	Nonpriority creditor's name and mailing address Constellation New Energy, Inc. PO Box 4640 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,903.11
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3.16	Nonpriority creditor's name and mailing address Corporate Coffee Systems 745 Summa Ave Westbury, NY 11590 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$378.08
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3.17	Nonpriority creditor's name and mailing address Crescent Hotels & Resorts LLC 10306 Eaton Place Suite 430 Fairfax, VA 22030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Management Agreement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,855.96
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Debtor	Golden Seahorse LLC Name	Case number (if known)	22-11582
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3.18	Nonpriority creditor's name and mailing address Expedia Group 1111 Expedia Group Way Seattle, WA 98119 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,784.28
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3.19	Nonpriority creditor's name and mailing address Flight Centre (UK) Limited Level 6 CI TWR Surrey KT34TE Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$591.29
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3.20	Nonpriority creditor's name and mailing address General Personnel Services Inc 3907 Prince Street #5BB Flushing, NY 11354 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,258.60
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3.21	Nonpriority creditor's name and mailing address Guest Supply PO Box 6771 Somerset, NJ 08875 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$886.85
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3.22	Nonpriority creditor's name and mailing address H.I. Wall Street Hotel Investo Manhattan Regional Center 158-13 72nd Ave, Suite 2D Fresh Meadows, NY 11365 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000,000.00
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3.23	Nonpriority creditor's name and mailing address HD Supply Facilities Maintenanc P.O. Box 509058 San Diego, CA 92150 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,720.29
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3.24	Nonpriority creditor's name and mailing address Hewlett-Packard Financial Serv PO Box 402582 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,777.28
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Debtor	Golden Seahorse LLC <small>Name</small>	Case number (if known)	22-11582
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3.25	Nonpriority creditor's name and mailing address HH Associates Dept Ch 17973 Palatine, IL 60055 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$205.15
3.26	Nonpriority creditor's name and mailing address Hireright LLC PO Box847891 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$469.47
3.27	Nonpriority creditor's name and mailing address Hospitality Graphics Inc. 242 West 36th St. New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$585.75
3.28	Nonpriority creditor's name and mailing address Hysendal USA LLC 103 Washington Street Suite 3 New York, NY 10006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$912,345.22
3.29	Nonpriority creditor's name and mailing address Intelligent Blends LP 5330 Eastgate Mall San Diego, CA 92121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,999.70
3.30	Nonpriority creditor's name and mailing address Intercontinental Hotels Group PO Box 101074 Atlanta, GA 30392 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>License Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350,994.86
3.31	Nonpriority creditor's name and mailing address Iresponze, LLC 60 Pointe Circle Greenville, SC 29615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$875.00

Debtor	Golden Seahorse LLC <small>Name</small>	Case number (if known)	22-11582
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3.32	Nonpriority creditor's name and mailing address Jai Mon Tour 1350 Rue Royale Trios Rivieres QB G9A 4J4 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,788.90
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3.33	Nonpriority creditor's name and mailing address M7 Services 1310 Rankin Rd. Ste 300 Houston, TX 77073 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$314.65
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3.34	Nonpriority creditor's name and mailing address Marsh USA Inc. PO Box 846015 Dallas, TX 75284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,381.36
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3.35	Nonpriority creditor's name and mailing address MVM Technology 27 William Street Sayreville, NJ 08872 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,098.44
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3.36	Nonpriority creditor's name and mailing address Nalco Company LLC PO Box 70716 Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$895.00
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3.37	Nonpriority creditor's name and mailing address ODP Business Solutions PO Box 633204 Cincinnati, OH 45263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,321.46
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3.38	Nonpriority creditor's name and mailing address Oracle America Inc. PO Box 203448 Dallas, TX 75320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,433.07
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Debtor	Golden Seahorse LLC <small>Name</small>	Case number (if known)	22-11582
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3.39	Nonpriority creditor's name and mailing address Party Technology Solutions LLC 5110 Lancaster Street Harrisburg, PA 17111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,214.00
3.40	Nonpriority creditor's name and mailing address Plasticard-Locktech Internatio PO Box 679814 Dallas, TX 75267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,171.68
3.41	Nonpriority creditor's name and mailing address Ritz Hotels Services 179 Lafayette St. Paterson, NJ 07501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,906.57
3.42	Nonpriority creditor's name and mailing address Rotavele Elevator Service Inc. 414 Seneca Ave Ridgewood, NY 11385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,228.14
3.43	Nonpriority creditor's name and mailing address Sentry Communications & Securi 60 Bethpage Road Hicksville, NY 11801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$653.26
3.44	Nonpriority creditor's name and mailing address TA Connections PO Box 74008563 Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$467.06
3.45	Nonpriority creditor's name and mailing address Travelclick Inc. PO Box 731577 Dallas, TX 75373 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,385.44

Debtor	Golden Seahorse LLC <small>Name</small>	Case number (if known)	22-11582
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3.46	Nonpriority creditor's name and mailing address TTI Technologies Internationa 483 10th Ave New York, NY 10018 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$650.00
3.47	Nonpriority creditor's name and mailing address U.S. Small Business Administra 409 Third St. SW Washington, DC 20416 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EIDL Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$189,000.00
3.48	Nonpriority creditor's name and mailing address Verified Next Payment Solution 8115 Maple Lawn Blvd. Suite 350 Fulton, MD 20759 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$273.98
3.49	Nonpriority creditor's name and mailing address Visiting Media LLC LB 1207 Seattle, WA 98124 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,080.00
3.50	Nonpriority creditor's name and mailing address Waste Connections of NY Inc. 120 Wood Avenue South Iselin, NJ 08830 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,830.75

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	<table border="0" style="width: 100%;"> <tr> <td colspan="2" style="border: 1px solid black; background-color: #f0f0f0; padding: 2px;">Total of claim amounts</td> </tr> <tr> <td style="width: 10%;">5a. Total claims from Part 1</td> <td style="width: 90%;">\$ 503,286.44</td> </tr> <tr> <td>5b. Total claims from Part 2</td> <td>+ \$ 5,837,344.27</td> </tr> <tr> <td>5c. Total of Parts 1 and 2 <small>Lines 5a + 5b = 5c.</small></td> <td style="border: 1px solid black; padding: 5px;">\$ 6,340,630.71</td> </tr> </table>	Total of claim amounts		5a. Total claims from Part 1	\$ 503,286.44	5b. Total claims from Part 2	+ \$ 5,837,344.27	5c. Total of Parts 1 and 2 <small>Lines 5a + 5b = 5c.</small>	\$ 6,340,630.71
Total of claim amounts									
5a. Total claims from Part 1	\$ 503,286.44								
5b. Total claims from Part 2	+ \$ 5,837,344.27								
5c. Total of Parts 1 and 2 <small>Lines 5a + 5b = 5c.</small>	\$ 6,340,630.71								

Fill in this information to identify the case:

Debtor name **Golden Seahorse LLC**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) **22-11582**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Exterminating Service Agreement**

State the term remaining

List the contract number of any government contract

**Abalon Exterminating Company
261 Fifth Avenue
New York, NY 10016**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Landlord-Tenant Lease re premises located at 103 Washington St., Ground Floor, NY, NY 10006**

State the term remaining

List the contract number of any government contract

11 years

**Amazon Restaurant & Bar Inc.
103 Washington St.
Fl. 1
New York, NY 10006**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Fire Safety Maintenance Agreement**

State the term remaining

List the contract number of any government contract

5.5 months

**Casey Fire Systems, Inc.
39-27 59th Street
Woodside, NY 11337**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Fire Protection Agreement**

State the term remaining

List the contract number of any government contract

**Citywide Fire Sprinkler
31-70 College Point Boulevard
Flushing, NY 11354**

Debtor 1 **Golden Seahorse LLC**

Case number (if known) **22-11582**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **Equipment Service Agreement**

State the term remaining

List the contract number of any government contract

**Corporate Coffee Systems, LLC
745 Summa Avenue
Westbury, NY 11590**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Hotel Management Agreement**

State the term remaining

List the contract number of any government contract

**Crescent Hotel & Resorts, LLC
1036 Eaton Place
Suite 430
Fairfax, VA 22030**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Fire Safety Plan Hotel Contract**

State the term remaining

List the contract number of any government contract

**Crocker Fire Drill Corporation
PO Box 368
Islip Terrace, NY 11752**

2.8. State what the contract or lease is for and the nature of the debtor's interest **Cable/Television Programming/Networking Services Agreement**

State the term remaining

List the contract number of any government contract

44 months

**DMJ and Associates, Inc.
d/b/a MVM Technology
27 William Street
Sayreville, NJ 08872**

2.9. State what the contract or lease is for and the nature of the debtor's interest **Contractor and Staffing Agreement**

State the term remaining

List the contract number of any government contract

May be terminated at any time upon 30 days prior written notice

**General Personnel Services, Inc.
3907 Prince St.
#5BB
Flushing, NY 11354**

2.10. State what the contract or lease is for and the nature of the debtor's interest **Equipment Lease Agreement**

State the term remaining

15 months

**Hewlett-Packard Financial Serv
200 Cornell Drive
Berkeley Heights, NY 07922**

Debtor 1 **Golden Seahorse LLC**

First Name

Middle Name

Last Name

Case number (if known) **22-11582**

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.11. State what the contract or lease is for and the nature of the debtor's interest **Franchise/License Agreement**

State the term remaining

**Holiday Hospitality Franchisin
Three Ravinia Drive
Suite 100
Atlanta, GA 30346**

List the contract number of any government contract _____

2.12. State what the contract or lease is for and the nature of the debtor's interest **Program Technical Support (Software Update License) Services Agreement**
State the term remaining **11.5 months**

**Oracle America, Inc.
PO Box 884471
Los Angeles, CA 90088**

List the contract number of any government contract _____

2.13. State what the contract or lease is for and the nature of the debtor's interest **Elevator Service Agreement**

State the term remaining

**Rotavele Elevtaor Service Inc.
414 Seneca Avenue
Ridgewood, NY 11385**

List the contract number of any government contract _____

2.14. State what the contract or lease is for and the nature of the debtor's interest **Hotel's Guest Valet and Staff Uniform/Linen Cleaning and Servicing**

State the term remaining

**The Ritz Dry Cleaning Services
791 Kent Ave
Brooklyn, NY 11205**

List the contract number of any government contract _____

2.15. State what the contract or lease is for and the nature of the debtor's interest **Removal of Non-Hazardous Trade Waste**

State the term remaining

7.5 Months

**Waste Connections of NY, Inc.
120 Wood Avenue South
Suite 302
Iselin, NJ 08830**

List the contract number of any government contract _____

Fill in this information to identify the case:

Debtor name Golden Seahorse LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) 22-11582

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1		Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2		Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3		Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4		Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G